

12-20-01

PATENT

Total Pages

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
UTILITY PATENT APPLICATION TRANSMITTAL

NAMED INVENTOR OR APPLICATION IDENTIFIER: **Stadler et al.**
RHYTHM-BASED TRANSITION TO DISCRIMINATORY ARRHYTHMIA CLASSIFICATION

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Box Patent Application, Commissioner of Patents, Washington, D.C. 20231, "EXPRESS No. EV 99 707 229 US, on this 17th day of December, 2001.

Sue McCoy
Printed Name
[Signature]
Signature

Commissioner for Patents
BOX PATENT APPLICATION
Washington, D.C. 20231

12/18/01
10/023234
12/18/01

Sir:

We are transmitting herewith the attached:

- X **Patent Application Transmittal**
- X **Specification:**
Total pages: 26 (including claims and abstract: Spec. 17 sheets; Claims 8 sheets; Abstract 1)
- X **Drawings:**
Total sheets: 7
☒ formal ☐ informal

- ☒ **Combined Declaration and Power of Attorney:**
 - ☒ executed
 - ☐ copy from prior application
 - ☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))
 - ☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

- X **Accompanying application parts:**
 - ☐ Notification of filing a
 - ☒ Assignment of the Invention to Medtronic, Inc.
 - ☒ Assignment cover sheet
 - ☒ Information Disclosure Statement
 - ☒ PTO Form 1449
 - ☒ Copies of IDS citations
 - ☐ Preliminary Amendment
 - ☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.
 - X ☒ Return Postcard

IF A CONTINUING APPLICATION:

- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)
of prior application No. _____ / _____.
- ☐ Amend the specification by inserting before the first line the sentence: This application is a ☐ continuation ☐ division ☐ continuation in part of application number _____, filed _____.
- ☐ Cancel in this application original claims _____ of the prior application before calculating the filing fee.
(At least the original independent claim must be retained for filing purposes.)
- ☐ The prior application is assigned of record to Medtronic, Inc.
- ☐ The Power of Attorney in the prior application is to: _____.

☐ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) _____, filed _____.

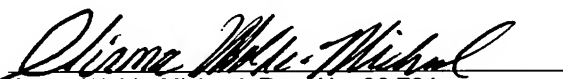
☒ Address all future correspondence to: Girma Wolde-Michael, Reg. No. 36,724
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FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	55	20	= 35	x 18	630
Independent Claims	7	3	= 4	x 84	336
Multiple Dependent Claims	0		0	+ 280	0
Basic Filing Fee					\$740.00
TOTAL					1706.00

Charge Deposit Account No. 13-2546 the amount of \$1706.00 and \$40.00 for the assignment recordation fee for a **TOTAL OF \$1746.00.**

The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

12/17/01
Date


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